

# FEE TRANSMITTAL

## For FY 2009

☐ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 130)

### Complete if Known

Application Number	10/531,767
Filing Date	10/22/2003
First Named Inventor	Eva-Maria Dusterhoft
Examiner Name	Andrew E. Krause
Art Unit	1781
Attorney Docket	0470 - 051057

### METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	
Utility	330	82	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Plant	220	110	330	165	170	85	_____
Reissue	330	165	540	270	650	325	_____
Provisional	220	110	0	0	0	0	_____

#### 2. EXCESS CLAIM FEES

Fee Description	<u>Small Entity</u>	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195
<b>Total Claims</b> - <b>20 or HP</b> = _____ x _____ = _____	<b>Multiple Dependent Claims</b>	
HP = highest number of total claims paid for, if greater than 20.	Fee (\$)	Fee Paid (\$)

<b>Indep. Claims</b> - <b>3 or HP</b> = _____ x _____ = _____	Fee (\$)	Fee Paid (\$)
HP = highest number of independent claims paid for, if greater than 3.		

#### 3. APPLICATION SIZE FEE

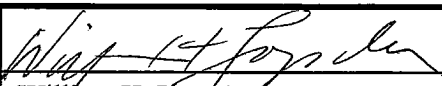
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____	= _____	

#### 4. OTHER FEE(S)

Non-English Specification,	\$130 fee (no small entity discount)	<b>Fees Paid (\$)</b>
Other (e.g., late filing surcharge):	Petition for Extension of Time-1month	\$130

### SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	22,132	Telephone	412-471-8815
Name (Print/Type)	William H. Logsdon	Date	September 24, 2010		